

Application No. (if known): 10/028,624

Attorney Docket No.: 03310/023001

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One Month Request for Extension of Time Under 37 CFR 1.136(a)

(1 page)

Submission Under 37 C.F.R. § 1.114 (6 pages)

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Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known , suant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/028,624-Conf. #6729 **Application Number** FEE TRANSMITTAL December 20, 2001 Filing Date For FY 2006 Yutaka Kaneda First Named Inventor J. C. Norris **Examiner Name** 2841 Applicant claims small entity status. See 37 CFR 1.27 Art Unit RK OFFICE 03310/023001 TOTAL AMOUNT OF PAYMENT Attorney Docket No. 910.00 METHOD OF PAYMENT (check all that apply) Other (please identify): x Credit Card Money Order None Check Osha · Liang LLP x Deposit Account Deposit Account Number: 50-0591 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity **Small Entity** Small Entity Fee (\$) Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) 150 500 250 200 100 300 Utility 130 65 100 50 200 100 Design 300 150 160 80 200 100 Plant 600 300 250 Reissue 300 150 500 200 100 0 0 0 0 Provisional Small Entity 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description 50 25 Each claim over 20 (including Reissues) 200 100 Each independent claim over 3 (including Reissues) 360 180 Multiple dependent claims Multiple Dependent Claims Fee Paid (\$) **Total Claims** Extra Claims Fee (\$) Fee Paid (\$) - 20 = Fee (\$) HP = highest numer of total claims paid for, if greater than 20. Fee Paid (\$) Indep. Claims Extra Claims -3= HP = highest numer of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Fee (\$) Number of each additional 50 or fraction thereof Extra Sheets (round up to a whole number) x - 100 = Fees Paid (\$)

Other (e.g., late filing surcharge): 1801 Request for c	790.00			
SUBMITTED BY Signature 1-8 +45,079	Registration No.	48,885	Telephone	(713) 228-8600
Name (Print/Types T. Chyau Liang, Ph.D.			Date	May 30, 2006

120.00

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1251 Extension for response within first month